

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
**TRANSCRIPT ORDER FORM**

111 First Street  
Bay City, MI 48708

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17th Floor  
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**Order Party: Name, Address and Telephone Number**

Name Susheel Kirpalani  
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Address 51 Madison Ave., 22nd Floor  
City, State, Zip New York, NY 10038  
Phone 212-849-7000  
Email susheelkirpalani@quinnemanuel.com

**Case/Debtor Name:** City of Detroit, Michigan

**Case Number:** 13-53846-swr

**Chapter:** 9

**Hearing Judge:** Hon. Steven Rhodes

☒ Bankruptcy ☐ Adversary

☐ Appeal Appeal No: \_\_\_\_\_

**Hearing Information** (A separate form must be completed for **each** hearing date requested.)

**Date of Hearing:** 01/16/2014 **Time of Hearing:** 2:00PM **Title of Hearing:** Hearing

Please specify portion of hearing requested: ☒ Original/Unredacted ☐ Redacted ☐ Copy (2<sup>nd</sup> Party)

☒ Entire Hearing ☐ Ruling/Opinion of Judge ☐ Testimony of Witness ☐ Other

Special Instructions: \_\_\_\_\_

**Type of Request:**

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**Signature of Ordering Party:**

/s/ Susheel Kirpalani Date: 1/16/2014  
By signing, I certify that I will pay all charges upon completion  
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